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Fabien M.J. GUILLORIT

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**DECLARATION FOR UTILITY OR** 

**DESIGN** 

Prior Foreign Application

Number(s)

Attorney Docket Number

First Named Inventor

PATENT APPLICATION	C	COMPLETE IF KNOWN	
(37 CFR 1.63)	Application Number	1	
☑Declaration ☐Declaration Submitted OR Submitted after initia	Filing Date		,
With Initial Filing (surcharg	- I CIOGD ALGIN		
required)	Examiner Name		
As a below named inventor, I hereby of My residence, post office address, and clind I believe I am the original, first and sole inventorare listed below) of the subject matter which is CONSTANT SOUND LEVEL	tizenship are as stated below next	original, first and joint inv	entor (if plural names
the specification of which  is attached hereto	(Title of the Invention)		
OR			
was filed on (MM/DD/YYYY)	as United States Ap	plication Number or PCT	international
Application Number	and was amended on (MM/DD/Y	YYY)	(if applicable).
I hereby state that I have reviewed and understan specifically referred to above.	d the contents of the above identified ep	ecification, including the c	laims as amended
I acknowledge the dufy to disclose information wh applications, material information which became a international filing date of the continuation-in-part	veilable between the filing date of the p		
I hereby claim foreign priority benefits under 35 U breeder's rights certificate(s), or 365(a) of any PC States of America, listed below and have also ide breeder's rights certificate(s), or of any PCT inter claimed.	CT international application which design hilfied below, by checking the box any f	mated at least one countr preign application(s) for pr	y other than the United latent, inventor's or plant
Prior Foreign Application	Foreign Filling Date	Priority Cert	Med Copy Attached?

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto:

Country

[Page 1 of 2]

Foreign Filing Date

(MM/DDYYYY) Country

**Priority Not Claimed** 

YES

NO

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Petent and Trademark Office, Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box 1450, Alexandria, VA 22313-1450.

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## **DECLARATION** — Utility or Design Patent Application 24737 Direct all correspondence to: X Customer Number or Bar Code Label OR Correspondence address below PATENT TRADEMARK OFFICE Name Address City State ZIP Telephone Country I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that wilful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such wilful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor Family Name GUILLORIT Given Name Fabien M.J. or Surname (first and middle [if any]) inventor's Date : Signature ¥ The Netherlands Eindhoven Residence: City State Country Citizenship · Sint Gerardusiaan 20 Mailing Address Eindhoven 5644 NP The Netherlands City State ZIp Country NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor Given Name **Family Name** (first and middle [if any]) or Sumame Inventor's Date Signature Residence: City State Country Citizenship

Zip

supplemental Additional Inventor(s) shoot(s) PTO/SB/02A attached hereto.

Country

State

**Mailing Address** 

Additional inventors are being named on the

City